

<i>SERFF Tracking Number:</i>	<i>MASS-128076293</i>	<i>State:</i>	<i>Arkansas</i>
<i>Filing Company:</i>	<i>Massachusetts Mutual Life Insurance Company</i>	<i>State Tracking Number:</i>	
<i>Company Tracking Number:</i>	<i>SL17 SOV</i>		
<i>TOI:</i>	<i>L06I Individual Life - Variable</i>	<i>Sub-TOI:</i>	<i>L06I.002 Single Life - Flexible Premium</i>
<i>Product Name:</i>	<i>SL17 SOV Filing</i>		
<i>Project Name/Number:</i>	<i>SL17 SOV Filing/SL17 SOV Filing</i>		

## Filing at a Glance

Company: Massachusetts Mutual Life Insurance Company		
Product Name: SL17 SOV Filing	SERFF Tr Num: MASS-128076293	State: Arkansas
TOI: L06I Individual Life - Variable	SERFF Status: Closed-Accepted	State Tr Num:
	For Informational Purposes	
Sub-TOI: L06I.002 Single Life - Flexible Premium	Co Tr Num: SL17 SOV	State Status: Closed-Accepted for Informational Purposes
Filing Type: Form		Reviewer(s): Linda Bird
	Authors: Robin Perez, Jennifer Dube, Nick Sheehan	Disposition Date: 05/09/2012
	Date Submitted: 05/03/2012	Disposition Status: Accepted For Informational Purposes
Implementation Date Requested: On Approval		Implementation Date:
State Filing Description:		

## General Information

Project Name: SL17 SOV Filing	Status of Filing in Domicile: Pending
Project Number: SL17 SOV Filing	Date Approved in Domicile:
Requested Filing Mode: Informational	Domicile Status Comments:
Explanation for Combination/Other:	Market Type: Individual
Submission Type: New Submission	Individual Market Type:
Overall Rate Impact:	Filing Status Changed: 05/09/2012
	State Status Changed: 05/09/2012
Deemer Date:	Created By: Robin Perez
Submitted By: Robin Perez	Corresponding Filing Tracking Number: SL17 SOV Filing
Filing Description:	
Massachusetts Mutual Life Insurance Company	
NAIC ID# 435-65935	
FEIN#: 04-1590850	
Informational Filing	
Form: SL17-AR-2010, Modified Single Premium Adjustable Life Insurance Policy	

SERFF Tracking Number: MASS-128076293 State: Arkansas

Filing Company: Massachusetts Mutual Life Insurance Company State Tracking Number:

Company Tracking Number: SL17 SOV

TOI: L061 Individual Life - Variable Sub-TOI: L061.002 Single Life - Flexible Premium

Product Name: SL17 SOV Filing

Project Name/Number: SL17 SOV Filing/SL17 SOV Filing

The above-referenced policy form was previously approved 4/19/2010 by the Department. MassMutual has not illustrated, marketed or issued any policies under this policy form. We would like to decrease the guaranteed interest rate on the schedule page from 2% to 1%. This rate was bracketed in the original filing. The reason for the decreased interest rate is that by using a 1% guarantee instead of 2%, we significantly reduce the cost of unfavorable investment returns while still guaranteeing policyholders' principal (less charges) and providing a meaningful crediting rate. We have attached a revised Statement of Variability and Actuarial Memorandum reflecting this change. There are no other changes to the policy form.

State Narrative:

## Company and Contact

### Filing Contact Information

Robin Perez, Compliance Specialist rperez@MassMutual.com  
 1295 State Street 860-562-4409 [Phone]  
 M177 860-562-6151 [FAX]  
 Springfield, MA 01111-0001

### Filing Company Information

Massachusetts Mutual Life Insurance Company CoCode: 65935 State of Domicile: Massachusetts  
 1295 State Street Group Code: 435 Company Type:  
 MIP: M381 Group Name: State ID Number:  
 Springfield, MA 01111 FEIN Number: 04-1590850  
 (800) 767-1000 ext. [Phone]

## Filing Fees

Fee Required? No  
 Retaliatory? No  
 Fee Explanation:  
 Per Company: No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
Massachusetts Mutual Life Insurance Company	\$0.00	05/03/2012	
Massachusetts Mutual Life Insurance Company	\$75.00	05/03/2012	58922907

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## Correspondence Summary

### Dispositions

Status	Created By	Created On	Date Submitted
Accepted For Linda Bird Informational Purposes		05/09/2012	05/09/2012

*SERFF Tracking Number:*      *MASS-128076293*      *State:*      *Arkansas*  
*Filing Company:*      *Massachusetts Mutual Life Insurance Company*      *State Tracking Number:*  
*Company Tracking Number:*      *SL17 SOV*  
*TOI:*      *L06I Individual Life - Variable*      *Sub-TOI:*      *L06I.002 Single Life - Flexible Premium*  
*Product Name:*      *SL17 SOV Filing*  
*Project Name/Number:*      *SL17 SOV Filing/SL17 SOV Filing*

## **Disposition**

Disposition Date: 05/09/2012

Implementation Date:

Status: Accepted For Informational Purposes

Comment:

Rate data does NOT apply to filing.

SERFF Tracking Number:	MASS-128076293	State:	Arkansas
Filing Company:	Massachusetts Mutual Life Insurance Company	State Tracking Number:	
Company Tracking Number:	SL17 SOV		
TOI:	L06I Individual Life - Variable	Sub-TOI:	L06I.002 Single Life - Flexible Premium
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Schedule	Schedule Item	Schedule Item Status	Public Access
Supporting Document	Flesch Certification		No
Supporting Document	Application		No
Supporting Document	Life & Annuity - Acturial Memo		No
Supporting Document	Statement of Variability		Yes

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## Supporting Document Schedules

	Item Status:	Status Date:
<b>Bypassed - Item:</b> Flesch Certification <b>Bypass Reason:</b> not applicable to this filing. <b>Comments:</b>		
<b>Bypassed - Item:</b> Application <b>Bypass Reason:</b> not applicable to this filing. <b>Comments:</b>		
<b>Satisfied - Item:</b> Life & Annuity - Acturial Memo <b>Comments:</b> <b>Attachment:</b> SL17 Actuarial Memo (Jan2012).pdf		
<b>Satisfied - Item:</b> Statement of Variability <b>Comments:</b> <b>Attachment:</b> STOFVARB.pdf		

## STATEMENT OF VARIABILITY

The following summarizes the bracketed material shown in the policy. The dollar amounts will vary depending on policy owner selection. We certify that this material will always meet the minimum requirements of your state

### Policy SL17-2010

The Policy Number reflects the number we assign to the policy.

The Insured reflects the actual name of the insured, "John Doe" is shown as an example.

The Selected Face Amount shown on the Cover Page and Schedule reflects the actual amount of coverage. The minimum Selected Face Amount per individual per case is \$50,000 but can be higher subject to underwriting guidelines.

Right to Return Policy Provision is subject to change in accordance with state regulation.

Page 1 – Issue Date and Policy Date reflect effective dates of the policy.

Page 1 - Paid-Up Policy Date reflect the policy anniversary nearest the insured's 95<sup>th</sup> birthday.

Page 1 – Insured's Age on Policy Date reflects the insureds nearest birthday at time of issue.

Page 1 – Initial Single Premium – The initial single premium is the net single premium.

Page 1 – If the Monthly face amount charge is equal to \$0.00, this sentence will be removed. The amount can vary between \$0.00 - \$1.54167 and age.

Page 1 - We may or may not charge an Administration Charge and will never exceed \$9.00.

Page 1 - This policy can be written as non-tobacco or tobacco. This policy will be written on a Guaranteed Issue basis, simplified issue, or full underwritten.

Page 2 – The Exchange Charge provision uses a different schedule for policies on insureds with issue ages greater than 70. For policies with issue ages of 71+ , the Schedule of Exchange Charges is an 8-year schedule grading down in succeeding Policy Years according to this schedule: 6% in Policy Year 1, then 6%, 5%, 5%, 4%, 3%, 2%, 1% in Policy Years 2-8, then 0% of the Initial Single Premium in Policy Years 9+.

Page 2 – This policy can issued as Male. Female or Unisex.

Page 2 – The Minimum annual interest rate will never be less than 1%.

Page 3 – The Maximum Monthly Insurance charges do not exceed 2001 CSO for standard risks, but are shown in brackets because they vary with the issue age and gender of the insured, a male 35 is shown as an example.

Page 4 – The Minimum Face Amount Percentages reflect IRC 7702 CVAT values, but are shown in brackets because they vary with the issue age and gender of the insured, a male 35 is shown as an example.

Page 8 – The annual spread on loaned Account Value will never be more than 3%.

Page 12 – Advance Notice will never be more than 180 days.